

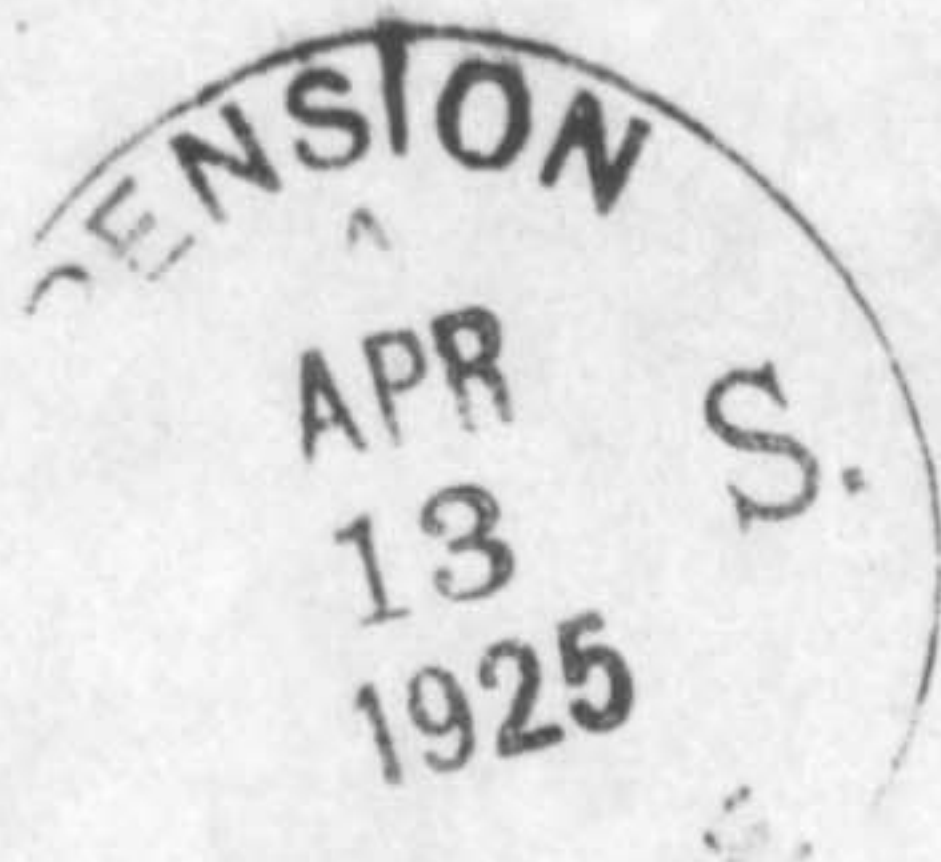
3-2014

No.; Name; Service *B. & O. C. Inf.*

REIMBURSEMENT.

I-we hereby certify that I-we hold *Mary E. Chargo*
 responsible for the payment of any portion of the accrued pension
 to which I-we may be entitled for services rendered, supplies fur-
 nished, or money expended during the last sickness and burial of
Adeline Linnea late a pensioner by
 certificate number *437915*

(This need not be sworn to)



B. H. Ruttie *ind.*
2134 D.H. on Walto. Ind.
(Mrs) Geo. H. Hollard
1631 Druid Hill Dr.
Balt. Ind.